

510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of the Safe Medical Devices Act (SMDA) of 1990 and 21 CFR 807.92. All data included in this document is accurate and complete to the best of KSEA's knowledge.

Applicant: Storz Medical AG
2151 E. Grand Avenue
El Segundo, CA 90245

Contact: Leigh Spotten
Regulatory Affairs Manager
Phone: (424) 218-8738

Device Identification: Trade Name:
Storz Modulith SLK
Common Name:
Extracorporeal Shock-Wave Lithotripter
Classification Name:
Lithotripter, Extracorporeal Shock-Wave, Urological

Date of Preparation June 7, 2012

Regulation: 21 CFR 876.5990

Product Code: LNS

Predicate Devices: Storz Modulith SLK
(K011700, cleared 08/16/2002)

Indication: The STORZ MEDICAL Lithotripter Model Modulith SLK is indicated for use in the noninvasive fragmentation of urinary calculi in the kidney and upper ureter.

Device Description: The Storz Modulith SLK is a modification of the previously cleared Storz Modulith SLK, K011700. The device consists of a Shockwave Generator, an operator interface/touch panel, and a coupling cushion. Shock waves are generated when a rapid current pulse changes the diameter of a cylindrical shaped body. The shock waves are focused by a parabolic reflector. A water circuit is used to for generating the required coupling pressure.

The Modulith SLK has been modified to include an integrated patient table, the Lithotrack optical coupling C-Arm alignment mechanism was replaced with the crosshair manual aiming mechanism used in the Modulith SLX-F2 device (K072788), and an updated user interface that includes patient table movement control. It is intended to be used properly by trained and qualified medical personnel for use in noninvasive fragmentation of urinary calculi in the kidney and the upper ureter. The modifications incorporated do not alter the intended use or the fundamental technology and also does not raise any issues of safety and effectiveness.

Technological Characteristics:

Device Name	Storz Modulith SLK (Subject Device)	Storz Modulith SLK (Predicate Device)
510(k) Number	Not yet assigned	K011700
Intended Use	non-invasive fragmentation of urinary calculi in the kidney and upper ureter	identical
Transport concept	Wheel based concept	identical
Penetration depth	150 mm	identical
Diameter of therapy source	178 mm	identical
Energy levels	1 to 9 (increments of 1) and 10 to 90 (increments of 5)	identical
Positive peak pressure	17 – 92 MPa	identical
Axial dimension of the -6dB focal volume	88 – 54 mm	identical
Lateral dimension of the -6dB focal volume	4.2 – 10 mm	identical
Shockwave source positioning Principle	Movable arm for under and over the table position of the therapy head.	Freely articulated arm for over table positioning of the therapy head.
Type	PCCU (Pulse current and charging unit)	PCCU (Pulse current and charging unit)
High voltage switch	Thyristor	Thyratron
X-Ray Localization Type	External C-arm	identical
Alignment control of C-arm	Manual aiming process in central opening of therapy head	Optical coupling (Lithotrack)
Ultrasound Localization Type	External ultrasound device	identical
Localization principle	In-line (in the central opening of the coil)	identical
Transducer	Aloka UST-9102U-3.5	identical
Movements of transducer	Rotation manual, lift motorized	identical
Patient table	Integrated table	Separate table (e.g. TRUMPF MARS endouro)
Max. Patient weight	225 kg for integrated table	225 kg for Trumpf MARS endouro
Control panel lithotripsy	Touch screen display. Shock wave parameters and controls are all time visible.	Foil keyboard with dot-matrix character display (shock wave counter or menu display) and 7 segment displays (for

		energy level, frequency, cushion level)	
Table controls	Integrated in touch screen of the MODULITH SLK	Separated control panel	
Emergency halt	Emergency halt for table motions, shock wave release and cushion inflation	Not available	
The shock wave characteristics reported below were measured according to the guideline described in the consensus standard IEC 61846 "Ultrasonics- Pressure pulse lithotripters- Characteristics of fields" (1998). A glass fiber hydrophone was used in the measurements. The results are found similar to the predicate device characteristics			
Parameter	Min	Typical	Max
Peak-positive acoustic pressure (MPa)	17	44	92
Peak-negative acoustic pressure (MPa)	9	16	20
Rise time (ns)	700	200	40
Compressional pulse duration (ns)	1200	670	250
Maximum focal width (mm)	10	6.3	4.2
Orthogonal focal width (mm)	10	6.3	4.2
Focal extent (mm)	88	62	54
Focal volume (mm ³)	4.6	1.3	0.5
Distance between the focus and target location (mm)	≤ 2.5	≤ 2.5	≤ 2.5
Derived focal acoustic pulse energy (mJ)	20	23	23
Derived acoustic pulse energy (mJ)	5	16	30

Non-Clinical Performance Data:

The STORZ MEDICAL Lithotripter Model Modulith SLK has undergone bench testing for its functions and performance, including verification of aiming accuracy, peak positive pressure and energy level of the shockwaves, software validation. Safety testing has been performed per FDA recognized standards IEC 60601-1, IEC 60601-1-2, IEC 60601-2-36 and IEC61846.

Conclusion:

The STORZ MEDICAL Lithotripter Model Modulith SLK is substantially equivalent to its predicate devices and the non-clinical testing demonstrates that the device is as safe, as effective, and performs as well as or better than the legally marketed devices.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
10903 New Hampshire Avenue
Document Control Room - WO66-G609
Silver Spring, MD 20993-0002

Ms. Leigh Spotten
Regulatory Affairs Manager
Karl Storz Endoscopy - America, Inc.
2151 E. Grand Avenue
EL ESGUNDO CA 90245

JUN 12 2012

Re: K120769
Trade/Device Name: Modulith SLK
Regulation Number: 21 CFR§ 876.5990
Regulation Name: Extracorporeal shock wave lithotripter
Regulatory Class: II
Product Code: LNS
Dated: May 11, 2012
Received: May 14, 2012

Dear Ms. Spotten:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

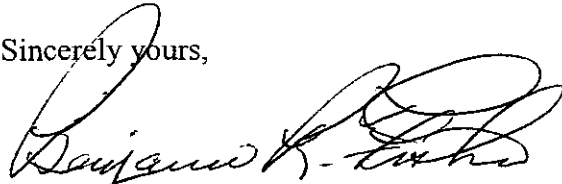
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical

device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Benjamin R. Fisher".

Benjamin R. Fisher, Ph.D.

Director

Division of Reproductive, Gastro-Renal,
and Urological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

Indication for use

510(k) Number (if known): K120769
~~Not assigned yet~~

Device Name: Modulith SLK

Indications for use: The STORZ MEDICAL Lithotripter Model Modulith SLK is indicated for use in the noninvasive fragmentation of urinary calculi in the kidney and upper ureter.


Prescription Use ✓
(21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)


(Division Sign-Off)
Division of Reproductive, Gastro-Renal, and
Urological Devices
510(k) Number K120769